

AMENDMENTS TO THE CLAIMS:

1. (Currently Amended) A method for improving cardiac function, comprising:
inserting a tensile member into a patient; and
inserting said tensile member into the patient's heart so as to ~~compress and~~ bring opposite
walls of each ventricle of the heart into contact with one another to thereby constrict and close
off lower portions of both ventricles of the heart.
2. (Original) The method defined in claim 1, further comprising anchoring said tensile
member to opposing myocardial sidewalls.
3. (Original) The method defined in claim 2 wherein the anchoring of said tensile member
including placing a flanged element of said tensile member in contact with myocardial tissues.
4. (Original) The method defined in claim 2 wherein said the anchoring of said tensile
member includes placing a barbed element in contact with myocardial tissues.
5. (Original) The method defined in claim 1 wherein said tensile member is a tack, the
inserting of said tack including ejecting said tack from a tubular member.
6. (Original) The method defined in claim 5 wherein the inserting of said tack includes

aiming said tack at an outer surface of the heart.

7. (Original) The method defined in claim 1 wherein the inserting of said tensile member includes passing said tensile member through a trocar sleeve or cannula.

8. (Original) The method defined in claim 1 wherein the inserting of said tensile member includes:

inserting a catheter into a ventricle of the patient's heart;

ejecting said tensile member from said catheter into the patient's myocardium so that said tensile member is anchored to the myocardium; and

exerting tension on said tensile member to pull opposing walls of the patient's heart towards one another so as to compress and close off lower portions of both ventricles of the heart.

9. (Currently Amended) A method for reducing ventricular volume, comprising:

inserting a flexible catheter into a ventricle of a patient's heart;

deploying a cardiac insert or implant from a leading end of said catheter; and

disposing said cardiac insert or implant in the patient's heart to bring opposite walls of at least one ventricle of the heart into contact with one another to thereby reduce the volume of the at least one ventricle of the patient's heart.

10. (Currently Amended) The method defined in claim 9 wherein said cardiac insert or implant is a tensile member, further comprising attaching said tensile member to the patient's heart, and exerting tension on said tensile member to draw the walls of the ~~patient's heart~~ the at least one ventricle towards one another.

11. (Original) The method defined in claim 10 wherein said tensile member is provided with at least one barb at a leading end, the attaching of said tensile member to the patient's heart including embedding said barb in the patient's heart.

12. (Original) The method defined in claim 10 wherein said tensile member is one of two tensile members, further comprising attaching the other tensile member to the patient's heart, the exerting of tension on said one of said tensile members including twisting the tensile members about one another.

13-18. (Canceled)

19. (Previously Presented) The method defined in claim 9 wherein said catheter is inserted into the patient through the vascular system of the patient.

20. (Currently Amended) A method for reducing ventricular volume, comprising:
inserting a catheter into a ventricle of a patient's heart;

deploying a cardiac insert or implant from a leading end of said catheter while said leading end is disposed in the patient's heart; and

disposing said cardiac insert or implant in the patient's heart to bring opposite walls of at least one ventricle of the heart into contact with one another to thereby reduce the volume of the at least one ventricle of the patient's heart.

21. (Currently Amended) The method defined in claim 20 wherein said cardiac insert or implant is a tensile member, further comprising attaching said tensile member to the patient's heart, and exerting tension on said tensile member to draw the walls of the ~~patient's heart~~ the at least one ventricle towards one another.

22. (Previously Presented) The method defined in claim 21 wherein said tensile member is provided with at least one barb at a leading end, the attaching of said tensile member to the patient's heart including embedding said barb in the patient's heart.

23. (Previously Presented) The method defined in claim 21 wherein said tensile member is one of two tensile members, further comprising attaching the other tensile member to the patient's heart, the exerting of tension on said one of said tensile members including twisting the tensile members about one another.

24. (Previously Presented) The method defined in claim 20 wherein said catheter is

inserted into the patient through the vascular system of the patient.

25. (Currently Amended) A method for reducing ventricular volume, comprising:
inserting a catheter through a patient's vascular system into a ventricle of the patient's heart;
deploying a cardiac insert or implant from a leading end of said catheter; and
disposing said cardiac insert or implant in the patient's heart to bring opposite walls of at least one ventricle of the heart into contact with one another to thereby reduce the volume of the at least one ventricle of the patient's heart.

26. (Previously Presented) The method defined in claim 25 wherein said cardiac insert or implant is a tensile member, further comprising attaching said tensile member to the patient's heart, and exerting tension on said tensile member to draw walls of the patient's heart towards one another.